FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* LAMBIASE MATTHEW (Last) (First) (Middle) C/O: CHIMERA INVESTMENT CORPORATION 1211 AVENUE OF THE AMERICAS, SUITE 2902 (Street) NEW YORK NY 10036 | | | | | | Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM] Date of Earliest Transaction (Month/Day/Year) 11/10/2010 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | c all applicab Director Officer (g below) CEO, vidual or Join Form file | Officer (give title Other (speci | | | pecify |
|--|--|-----|------|---|---------|--|-----|---|------------------|-----------------------|--|---------------------|---|------------|---|---|--|---|----------------------|
| (City) | (State) | (Zi | p) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | 2A. Deemed Execution D if any (Month/Day | | n Date, | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and de (Instr. | | | 5. Amount Securities Beneficially Following I Transactio | y Owned Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and | | | | (111501.4) |
| Common Stock 11/10 | | | | | 0/2010 | | | Р | | 40,000 | | Α | \$4 | 335,000 | | | D | | |
| Common Stock 11/10 | | | | | 10/2010 | | | | Р | | 10,00 | 10,000 A | | \$4 | 30,0 | 30,000 | | 1 | By 401(k) Plan |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month | | | ite, | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercis Expiration Dat (Month/Day/Ye | | te Securities Underly | | derlying curity | ying Derivative | | e G | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Evaluation of Posponsos: | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Amount (Instr. 4 | | (Instr. 4) | 5.1(5) | | | | |

Explanation of Responses

Remarks:

/s/Matthew Lambiase

11/10/2010

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.